

the NADE ADVOCATE



A Publication of the National Association of Disability Examiners

Volume 25, Number 2

Spring 2009

Mid Year Board Meetings

NADE Meets With SSA Commissioner and Disability Advocates

THE WEEK OF FEBRUARY 23, 2009, NADE's leaders visited the nation's capital to advocate for NADE's top issues. Arriving in Washington in advance of NADE's mid-year Board of Directors meeting, the NADE leadership team of President Georgina Huskey, President-elect Susan Smith, and Jeff Price, Legislative Director and twice Past President, began the week with a long discussion meeting with SSA Commissioner Michael Astrue and ended the week with a flurry of visits on Capitol Hill. In between, the NADE team had lengthy discussion meetings with the Social Security Advisory Board (SSAB), the National Academy of Social Insurance (NASI), the Consortium for Citizens with Disabilities (CCD), the National Association for Disability Representatives (NADR), the National Academy of Sciences – Institute of Medicine, the Congressional Budget Office (CBO) and others.

The NADE team not only voiced NADE's issues, we listened to what others had to say about their respective issues. We sought to solicit support for our issues and create an environment of education and the mutual sharing of knowledge and ideas to arrive at practical solutions to everyday problems.

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Congress To Eliminate 5-Month Waiting Period?

by Jeff Price, NADE Legislative Director

UNDER TITLE II OF the Social Security Act, approved applicants must wait five (5) months before they begin receiving cash benefits. The potential elimination of the 5-month waiting period has been the dream of almost everyone connected with the Social Security disability program. For Disability Examiners in the DDSs and Field Office personnel who process these applications, it is often heartbreaking and frustrating to process applications for claimants who are in dire straits caused by severe disability knowing that, even if the claimant is approved, there will be an extended period of time before the claimant receives their first disability check. Because so many of our members spoke out on this issue, NADE drafted its first position paper in 1999 to explain why the time had come to eliminate the waiting period.

Now that dream may become reality. U.S. Representative Mike McIntyre (D-NC) recently introduced legislation (H.R.33) calling for the elimination of the five month waiting period and the elimination of the reconsideration appeal step. NADE leaders were quick to praise Congressman McIntyre for introducing this important legislation, which has been referred to the Ways & Means Committee for consideration. Taking time from their scheduled meetings with the House Ways & Means Committee and the Senate Finance Committee on Wednesday, February 25th, NADE leaders, led by President Georgina Huskey and including President-elect Susan Smith and Legislative Director Jeff Price, met with Congressman McIntyre and his staff to review the proposed legislation and what it would mean for the future of the disability program. Congressman McIntyre indicated he and his staff were very passionate about the



U.S. Representative Mike McIntyre (D-NC) met with Legislative Director Jeff Price, NADE President Georgina Huskey, and President-elect Susan Smith.

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President's Message

ANOTHER MIDYEAR MEETING in Washington D.C. has passed and I am pleased to report that it was productive and very enlightening. We never experience a shortage of insightful comments or suggestions from our Officers, Regional Directors, or Appointees. Not only are they very busy at work relaying your messages and voicing your concerns, but our Board of Directors is tirelessly advocating for improved delivery of service to our claimants.



I will be seeing many of you soon at some of our regional training conferences, and then we'll meet again in Covington, Kentucky for *Rollin' on the River* training so we can keep up with SSA's continued transformation of our programs under the Social Security Act. This is always a great time of year when we can make new friends and professional contacts, and also where we gain new understandings of our dynamic disability programs. We have always been privileged to have many SSA executives and personnel participate in our conferences, year after year, to provide us with additional training and insight into what

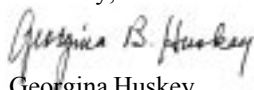
the American public deserves from our profession. NADE members always wish to help each other strive for timely, reasonable, and cost-saving determinations.

As you know, NADE has a very diverse membership including examiners, support staff, medical consultants, administrators, retirees, corporate members, and other stakeholders in the SSA disability programs. As president, I have cherished this diversity. Your efforts have broadened NADE's outlook and professional perspectives for a better tomorrow.

Have you been keeping in touch with the SSA Strategic Plan lately? In the words of Commissioner Astrue, *"The public expects us to get things done."* Our Commissioner is working hard to give SSA and the DDS the resources necessary to keep up with our demanding workloads. Commissioner Astrue has amazed NADE with his commitment to maintain communication with DDS examiners, advocate groups, Congress, NADE, and especially, with our claimants.

Thanks for your own commitment to "get things done" at your own office and with your own caseloads. The American public trusts in the disability programs because of the efforts you demonstrate to them everyday.

Sincerely,



Georgina Huskey
NADE President

The NADE Advocate is the official publication of the National Association of Disability Examiners. It provides a forum for responsible comments concerning the disability process. Official NADE positions are found in the comments by the NADE President and NADE Position Papers.

Advocate advertising rates are as follows:

Size	Single Run	Multiple runs
1/3 page	\$100.00	\$75.00 per issue
1/2 page	\$150.00	\$125.00 per issue
Full page	\$225.00	\$200.00 per issue

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NADE is an incorporated, nonprofit organization.

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Letters to the Editor are welcomed and may be selected for inclusion in future issues. Please forward ideas for future *Advocate* topics to the editor or your Regional Publications Representative. The next issue will be published in **Summer 2009**.

All correspondence should be directed through your Regional representative or NADE editor by **June 15, 2009**.

Members in the News

Steger Retires from Delaware DDS

Ida M. Steger began her career at the Delaware Division of Vocational Rehabilitation on April 16, 1972. She was responsible for testing and evaluating V. R. clients. She later supervised the Testing/Evaluation Unit on Vanderver Avenue. She moved to Disability Determination Services in 1973 as an Adjudicator I. During her tenure with the DDS, she was promoted to Adjudicator II in 1981, and shortly after in 1983 was further elevated to Vocational Rehabilitation Administrator responsible for the Quality Assurance unit.

Her position changed to DDS Administrator several years later. As a result of her outstanding performance in this capacity she was recognized by the Social Security Administration with the Regional Commissioners Citation. She attended the McGeorge School of Law in Sacramento, California in March of 1993. She received certification as a Disability Hearing Officer. For the majority of her career Ida has been a member for the National Association of Disability Examiners (NADE). In 2003 Ida fulfilled the requirements for membership into the National Council of Disability Determination Directors (NCDDD). In April 2008, Ida received the Associate Commissioner's citations for providing outstanding leadership to the Delaware Disability Determinations Services, and commitment of excellence in the area of Quality Assurance.

Ida's position as a DDS Administrator has required her to represent the agency at many DDS/SSA conferences. Ida's exemplary knowledge, dedication and commitment in the providing direction to the agency have contributed significantly to the disability program. Congratulations and best wishes during her retirement!



**Letters to the Editor
can be sent to:
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**Request for Newsletter
Grants should
be submitted to
Donna Hilton,
Publications Director.**

**For information on
Membership Grants,
contact Michele Namenek,
Membership Director.**

**Are you Certified through
NADE?**

**Certification applications
are available on the
NADE website:
www.nade.org**

**Or You May Contact The
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Committee Chair**

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NADE Correspondence

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February 21, 2009

Ms. Georgina Huskey, President
National Association of Disability Examiners
3435 Wilshire Blvd., Suite 1600
Los Angeles, California 90010

Dear Ms. Huskey,

I wanted you to know that we appreciate NADE's interest in medical consultants, as expressed in *NADE's Top Issues for 2009*. The American Association of Social Security Disability Consultants looks forward to working with the National Association of Disability Examiners to achieve our common goals.

Best wishes,
Alan L. Cowles, M.D., Ph.D., President
AASSDC

NADE CALENDAR OF EVENTS:

Quad Regional Conference	Crowne Plaza	Niagara Falls NY	May 6-9, 2009
Great Lakes/SW Reg Conference	Chicago Regional Office	Chicago IL	May 11-13, 2009
Pacific Regional Conference	Salem Conf Ctr/Phoenix Grand Hotel	Salem OR	May 12-15, 2009
2009 National Training Conference	Radisson Riverfront	Covington KY	Oct 5-9, 2009

NADE Goes On Record



www.nade.org

January 15, 2009

Statement for the Record Regarding Possible and Previously Imposed Furloughs of DDS Staff and Consideration of the Potential Impact of Hiring Freezes on DDS Services

The National Association of Disability Examiners (NADE) is a professional association whose primary purpose is to represent the nearly 15,000 employees who work for the State Disability Determination Services (DDSs). Our membership also includes personnel from Social Security's Central Office, claimant advocates, physicians, attorneys, and others. Through this diversity, we believe we have a unique perspective that reflects a pragmatic realism regarding the management of Social Security and SSI (Supplemental Security Income) disability programs. Our members are on the front lines in providing service to the millions of Americans who file each year for Social Security and/or Supplemental Security Income (SSI) disability benefits. Our members also process the first appeal for denied claims and we process the Continuing Disability Review (CDR) claims by which SSA and the DDSs seek to determine if those previously awarded such benefits remain entitled to receive them.

NADE members have been alarmed by decisions in some states to impose furloughs on state employees, including DDS staff, and decisions by other states to impose hiring freezes as these states face critical decisions to deal with their budget deficits. Some other states are considering similar actions. NADE members appreciate the need for state governments to deal with their budget deficits but we strongly disagree with the proposed solutions. **Furloughing state employees, including DDS employees who are 100% federally funded, is not the answer, nor are hiring freezes that cripple the ability of government to provide needed services, especially when so many citizens are now seeking those services.** We strongly urge that Governors in those states that have implemented hiring freezes and furloughs should reconsider and weigh the impact these decisions have on the ability of their administrations to provide the services needed by the citizens in their respective states. The decision to furlough DDS staff and/or to freeze hiring in DDSs means that the processing of applications for disability benefits will be even further delayed and that the potential for erroneous decisions will be greater.

Governmental services, such as those provided by the State Disability Determination Services (DDSs), that provide a direct impact on the lives of citizens, are even more utilized by those citizens during poor economic times. Specifically, the DDSs have already observed a marked increase in the number of applications for disability benefits. **Applications for Social Security and SSI disability benefits have increased 7 percent** for the December, 2008 quarter as compared to the December, 2007 quarter. This unexpected increase has been so alarming that **NADE recently petitioned the President-elect of the United States to assign nearly \$1 billion in additional funds to SSA's operating budget in order to handle the increase in disability applications.** It makes little sense for Congress to appropriate these additional funds to handle the increased workload if DDS workers are being furloughed and hiring freezes prevent DDSs from hiring a sufficient number of staff to process these increased claims.

In its Budget and Economic Outlook Report issued January 7, 2009, the Congressional Budget Office (CBO) forecast that the economic recession will last through 2009, making it the longest since World War II. Unemployment is expected to soar to 9% by the end of this fiscal year. Such a poor economic outlook can reasonably be expected to result in increased workloads in the DDSs where workloads are already at record levels. It would be impractical to expect the DDSs will be able to adequately respond to the growing need for their services if they are unable to hire sufficient staff or if existing staff are told not to report for work.

Gold Corporate Member



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State DDSs across the nation already are reporting severe staff shortages that have escalated in recent years and are now causing significant disruptions in their ability to provide quality service. Furloughs and hiring freezes compound this problem. **The attrition rate for DDSs in FY 2008 was nearly 15%!** Hiring freezes prevent DDSs from hiring new staff to fill vacant positions that must be filled if the DDSs are to provide quality service to the public. Furloughs and similar actions targeting DDS employees diminish morale among a workforce that must deal with ever increasing caseloads and with an increasing complexity in the work environment. Such practices are expected to result in the likelihood for additional attrition in the DDS workforce, making difficult situations impossible.

We strongly urge State Governors to reconsider any decision to furlough DDS personnel or to impose hiring freezes on DDSs. We note that **the operating budgets, including salary for all personnel in the DDSs, are provided for by the Social Security Administration and no state funds are expended in providing these services.** Therefore, it makes little sense imposing such drastic actions on a dedicated workforce when the economic impact this workforce has on any state government budget is zero.

NADE has been working with SSA and with other stakeholders to address the problems of high attrition and increased workloads in the DDSs. We would likewise be very interested in working with State Governors to ensure that the DDSs can continue to provide the best service possible to those seeking assistance and, simultaneously, maintain the integrity of the disability programs administered by the DDS. **We realize difficult decisions regarding how best to address state budget deficits will have to be made but we strongly urge that any furloughs of state employees and/or imposed hiring freezes should exempt DDS staff.**

On behalf of our members and the nearly 15,000 DDS employees we represent, we appreciate the consideration of each State Governor will give to this request.

Statement adopted by the National Association of Disability Examiners on January 15, 2009.

NADE Correspondence

COMMONWEALTH OF PENNSYLVANIA

EXECUTIVE OFFICES HARRISBURG

DEPUTY SECRETARY FOR
HUMAN RESOURCES AND MANAGEMENT

February 12, 2009

Georgina B. Huskey, President
National Association Of Disability Examiners
12533 Allin Street
Los Angeles, CA 90066

Dear Ms. Huskey:

Your February 5, 2009 email to the Governor's office has been referred to me for a response. We are doing our best to balance the tremendous fiscal challenges with the need to continue essential operations and services. We recognize the importance of these positions and are permitting the hiring into these positions within our Bureau of Disability Determination.

Thank you for your inquiry and your commitment to this very important program.

Sincerely,

/s/

James A. Honchar, SPHR
Deputy Secretary for Human Resources and Management

Cc: Secretary Naomi Wyatt, OA

NADE Correspondence



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February 10, 2009

The Honorable Michael J. Astrue, Commissioner
Social Security Administration
6401 Security Blvd.
Suite 900 Altmeyer Building
Baltimore, Maryland 21235

Dear Commissioner Astrue:

I am writing on behalf of the National Association of Disability Examiners (NADE) to thank you for your vigilant and determined support of the state disability determination agencies (DDSs) to enable these agencies to maintain appropriate hiring capabilities and staffing needs. Your recent letters to state governors and legislators have clearly expressed the need for the DDSs to be allowed to continue to hire and maintain necessary staff despite shortfalls in state revenues. Your letters have provided a framework for elected state officials to justify using a different approach with the DDS and other federally funded programs within their state. Budgetary actions targeted at the DDSs achieve nothing for state budgets.

These are extraordinary times and we recognize the need for extraordinary action. NADE commends you for what we consider to be extraordinary action. We do recognize, of course, that severe economic issues have impacted the states, causing significant budget deficits. However, we believe that the drastic actions taken by some state governors have appeared to lack the required forethought that should be exercised before such actions are taken. We firmly believe the actions taken by those governors, and considered by other governors, to furlough state employees, including DDS employees, and to restrict the hiring capabilities of the DDSs, are short-sighted and lack any justification. They also have the adverse effect to restrict hiring at a time when national unemployment is at its highest level in 35 years!

NADE has communicated with the governors of the states that have begun furloughing state employees and with the Chairman of the National Governors Association to fully explain our concerns. We are very grateful that you, too, have sent similar communications and that SSA has taken other actions to ensure that the DDSs should be able to maintain appropriate staffing levels to meet the needs of our customers – the disabled. With your strong and continued support, the DDSs will be better able to meet the upcoming challenges of increased workloads.

We commend you for your focus on customer service and for reminding our elected officials that the constituents they represent are also our customers. Thank you.

Sincerely,

Georgina Huskey, NADE President

Gold Corporate Member

SOUTH ATLANTIC MEDICAL GROUP
Contact: Dr. Paul Kahan

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323.725.7799

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NADR

National Association of Disability Representatives

1615 L Street NW, Suite 650, Washington DC 20036; Phone 202-822-2155; Fax 972-245-6701

March 5, 2009
Georgina B. Huskey
President
National Association of Disability Examiners
3435 Wilshire Blvd Ste #1600
Los Angeles, CA 90010

Dear Georgina:

I want to thank you, Jeffrey Price and Susan Smith for taking time to meet with my wife Michele, Jeanne Morin, Art Kaufman (via telephone) and me last week to discuss your top issues for 2009. As we discussed, we believe there is great commonality of interest between our organizations, and look forward to finding ways to work together to achieve our common goals.

In particular, NADR appreciates and shares your concerns about the current 827 process, and is committed to working with you and other members of the disability community to develop a solution that is efficient and timely, that preserves claimants' privacy rights, and that will be embraced by providers being asked to produce medical records. We have discussed this issue with Deputy Commissioner Foster, as well, and look forward to reviewing the language SSA has proposed to Congress to address the problem.

As we discussed last week, NADR's top legislative priority for this year is making permanent a program authorized by Section 303 of the Social Security Protection Act of 2004. That provision established a demonstration program to examine the effectiveness of non-attorney representatives who qualify for fee withholding by possessing a bachelor's degree (or equivalent expertise), malpractice insurance coverage, and completion of a test examining knowledge of the Social Security disability system. The program has been extremely effective in improving access to qualified representatives for claimants. Just as important, many NADR members work with claimants from the initial application, which serves not only to expedite valid claims, but also to provide counseling that can weed out inappropriate cases before they enter the system. Once a claimant does enter the system, qualified representatives who understand the requisite objective documentary needs can assist the claims examiner and adjudicators to gather this critical information in a timely manner. All this leads to savings of time and resources.

The demonstration program will sunset on March 1, 2010, along with a related provision extending the Title II attorney fee withholding and direct payment procedures to claims under Title XVI of the Act. We hope you will concur that these programs are valuable and effective, and should be made permanent during the first session of the 111th Congress.

As we discussed, we are still working to identify someone who understands neurological issues to participate in the mock hearing to be held during our Annual Meeting later this month. Jeff had mentioned that hemight have a suggestion in that regard. We would welcome that information.

Again, I want to thank you for your time and your willingness to reach out to NADR to discuss issues of importance to both organizations.

Sincerely,
/s/
Christopher P. Marois
President

Gold Corporate Member

**National Association of
Disability Representatives, Inc.**

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202.822.2155

NADE Correspondence

**STATE OF MARYLAND
DHMH**

Maryland Department of Health and Mental Hygiene
201 W. Preston Street Baltimore, Maryland 21201
Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – John M. Colmers, Secretary

March 17, 2009

Georgina B. Huskey, President
Natal Association of Disability Examiners
12533 Allin Street
Los Angeles, CA 90066

Dear Ms. Huskey:

Thank you for your letter to Governor Martin O'Malley regarding the furlough of State Employees in Maryland. The Governor received your letter and asked me to respond on his behalf.

In December, 2008, Executive Order 01.01.2008.20 State Employee Furlough and Salary Reduction Plan was signed. This plan was implemented due to budget shortfalls that were exacerbated by the national economic downturn. It was decided that substantial savings could be achieved without undue interruption of state services if a carefully managed furlough and salary reduction plan was implemented.

I appreciate your concerns about service delivery to the disabled as a result of the furlough. It is not our intent to disrupt services to any of the groups of citizens we serve. Many of our employees perform essential and important tasks in protecting the most vulnerable among us. I am confident that we can continue to perform those tasks at the highest competency levels, while at the same time, implementing a careful, fiscally responsible plan.

Thank you again for your letter. The Governor appreciates hearing from you and, on his behalf, I thank you for taking the time to express your concerns regarding disability services in Maryland.

Sincerely,

/s/

John M. Colmers
Secretary

Cc: The Honorable Martin O'Malley

Toll Free 1-877-4MD-DHMH * TTY for Disabled – Maryland Relay Service 1-800-735-2258 * Web Site: www.dhmh.state.md.us

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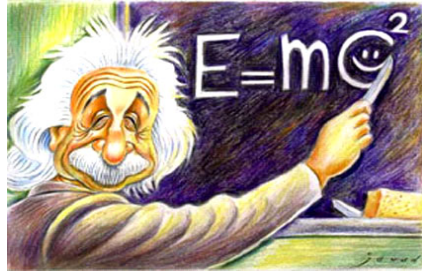
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NATIONAL DISABILITY PROFESSIONALS WEEK

June 15 – 19, 2009

Celebrating Excellence:



Building Knowledge Through NADE

TIME IS QUICKLY APPROACHING for the annual celebration held each June – National Disability Professionals Week (NDPW). NADE established National Disability Professionals Week in 1988. At that time, the celebration was held during the last week of September. In later years, NDPW was moved to the third week in June, which has remained its official date since June 1994. NDPW has traditionally been a time to recognize the hard work of disability professionals and to encourage and promote membership in NADE through outreach activities.

The NDPW committee reviewed many contest submissions for this year's NDPW theme. We had a total of nineteen contest entries this year—a tremendous increase over the eight entries from last year. Congratulations go to the Tennessee chapter for submitting the winning theme!

In addition, NADE President Georgina Huskey is taking the lead on soliciting support at local, regional and national levels for declaring June 15 – 19 as National Disability Professionals Week. Sample letters to be used for requests to local and regional persons of interest will be sent to regional directors – look for more information coming soon.

After the week's events are over, you will be asked to submit a narrative description of your chapter events. Your narrative should be submitted via e-mail as a Word document attachment to the committee chairperson, Margaret Yeats (Margaret.yeats@ssa.gov) by **Friday, July 10, 2009**. You will need to explain how your chapter included the activities you chose from the list. Make sure that you highlight all of the categories of activities that you participated in during the week. Please do not send photographs, memorabilia or other documentation of the event.

Two chapters from each chapter category size (small, medium and large), will be chosen as winners of the NDPW competition. There will be a first and second place winner in each category and there will be a cash prize of \$50.00 for each first place winner and \$25.00 for the second place winners. All six winning chapters will be announced at the general membership meeting at NADE's national conference which will be held October 5-9, 2009 in Covington, Kentucky.

For questions regarding NDPW, please contact any of the following committee members (email addresses are all in the SSA global address list):

Margaret Yeats
Beverly Wardyga
Crystal Bach
Cynthia Wilson
Rose Murray
Gail Fromdahl
Claudette Benser

Ideas for NDPW
Continued on page 17

Mid Year Board Meetings

NADE Meets with Commissioner Furloughs, Tech Changes Discussed *Continued from page 1*

Ruby Burrell, SSA Associate Commissioner for the Office of Disability Determinations (ODD) and Glenn Sklar, SSA Associate Commissioner for the Office of Disability Programs (ODP), were present for NADE's meeting with Commissioner Astrue and contributed to the discussions. This visit proved informative for all and the NADE leaders expressed their support for, and their appreciation of, all that the SSA leadership had done for the DDSs, especially in regard to recent events involving DDS personnel in some states and the ongoing budget process.

The Commissioner reported that funds have recently been released for SSA via the stimulus package for systems improvements (replacing the National Computer Center) and for disability claims processing. The Commissioner and the SSA leadership fully support appropriate funding allocations for the DDS for operational resources, salaries and personnel.

NADE expressed the concern that many states have hiring freezes currently in place and some states are furloughing their employees. The DDS staff has not been exempted from these actions, even though NADE and SSA have used great effort to point out to the Governors that the DDSs are 100% federally funded. The Commissioner reported he was taking the necessary steps to address these issues and that he expected resolution very soon for DDS employees to be exempted from the drastic budgetary actions taken by the States. The Commissioner and NADE share concern about the increased work load in view of the current economy and the rapidly approaching Baby Boomer retirement wave. SSA and NADE concurred this is obviously not the time for States to be taking personnel actions that result in DDS staff having reduced time or personnel to adjudicate claims.

SSA is continuing to pursue technological advances that will improve

customer service and the efficiency of the DDS operations. This includes the national roll out of the e-CAT adjudicative tool and the use of the Request for Program Consultation (RPC). SSA also supports providing greater WEB based learning on the SSA Website, and more case examples are being added.

SSA is continuing to explore the possibility of expanding the Single Decision-Maker (SDM) model and expanding the list of conditions to be included in the Compassionate Allowances (CAL) initiative. However the Office of Management and Budget (OMB) is not considering any new regulations until the economic problems have been addressed and it is likely that at least six months will elapse before any new SSA regulations can take effect.

NADE discussed with the Commissioner our commitment for enhancements to professional development for disability examiners and other DDS staff and the Commissioner renewed his commitment to this process also. Discussion between NADE and the Commissioner addressed the elimination of the medical release of information form (SSA-827) and advancing the Health Information technology project to a national model.

NADE renewed its call for the elimination of the 5-month waiting period for Social Security disability benefits and the 24-month waiting period for Medicare eligibility. While we recognize the costs of pursuing these objectives will be high, NADE repeated its message that the waiting periods are an anachronism that should be shed by an agency committed to public service.

NADE also renewed its call for a reduction in the 15 year vocationally



President-elect Susan Smith, SSA Commissioner Michael Astrue and NADE President Georgina Huskey and Legislative Director Jeff Price met to discuss disability issues of mutual concern.

relevant time period to 5 years. The Commissioner reported that the Agency was seriously considering this proposal and Associate Commissioner Glenn Sklar reported he had formed a workgroup to examine this proposal and that he expected a reduction would be forthcoming. While it may not be 5 years, it would be considerably less than the current 15 years. SSA did agree with NADE that 15 years was too long for today's mobile workforce and for a workforce that is witness to technological advances that change the manner in which jobs are performed from one decade to the next.

Other items for discussion included NADE's support for SSA's ongoing commitment to continually update the medical listings, expansion of the CDI units and changes to the CDR process, and ongoing advances to SSA's systems processes.

These themes were repeated in NADE's other discussion meetings throughout the week with SSAB, NADR, CBO, etc. while NADE also listened to what others had to say with regard to their views as to how the current adjudicative process could be improved. From these discussions, many ideas were developed and will be pursued in the months ahead toward the goal of finding common ground where multiple groups, with their own unique perspective of the adjudicative process, can agree as to how best to serve and protect the interests of the claimant and how the adjudicative

Continued on next page

GAO Studies ODAR Backlogs, Denial Notices

by C.J. August, Southwest Regional Director

DANIEL BERTONI AND SHELIA DRAKE, Director and Assistant Director of Education, Workforce and Income Security at the Government Accountability Office (GAO) spoke to the NADE board during our recent Midyear meeting in February.

Bertoni and Drake discussed some of their current projects. They will be studying the House of Representatives and the Senate's position on Social Security Disability. It is anticipated that as part of this study they will also be doing outreach and education about Social Security Disability because there are many newly elected congressional representatives. Another major study underway is a study of hearings backlogs. GAO will try to determine what effect the recently enacted stimulus package might have on backlogs. They are also studying the Commissioner's initiatives to reduce ODAR backlogs. For example, what effect might these initiatives have elsewhere in the disability process?

Bertoni and Drake mentioned some recently completed studies completed by GAO that are of interest to those of us in the disability program. While studying the medical evidence collection process, they found that the notices sent to denied disability applicants may be confusing or unclear. You can read more about this on the GAO website using this link:

<http://www.gao.gov/products/GAO-09-183R>.

The medical evidence collection study itself can be accessed at <http://www.gao.gov/products/GAO-09-149>.

NADE Meets with Commissioner, *continued*

model should take shape within the DDSs and beyond. No one connected with the disability claims process can take pride in the length of time it takes for claimants to receive a decision on their claim and certainly, no one can take pride in the backlog of claims. However, we can all take pride in the fact that we are willing to explore all options for improvements to the process that will truly result in improved customer service.

- Jeff Price, Legislative Director
& Past President



Sheila Drake and Dan Bertoni of the GAO discuss pending projects with the NADE Board.

OIG Investigates the Impact of DDS Furloughs/Hiring Freezes

by Tom Ward, Great Lakes Regional Director

PHILLIP HANVY, FROM THE Office of the Inspector General, reported at the NADE Mid-Year Board meeting that OIG will be issuing a report on the impact furloughs and/or hiring freezes will have SSA's disability programs. The review by OIG was done at the request of NADE. All DDS Directors were surveyed and asked: "Are there current or pending furloughs and/or hiring freezes in your state or jurisdiction and if so, will they impact your state DDS's operations?"

As of March 2009 four states had begun furloughing DDS employees. Two of those states were furloughing managers only. OIG has calculated the impact of those furloughs on DDS Agency workloads and on claimants who will have to wait longer to get the decisions.

The full report is available at <http://www.ssa.gov/oig/ADOBEPDF/A-01-09-29137.pdf>

Phillip Hanvy has worked in the DDS offices in Tennessee, Missouri, and Delaware. He currently works for OIG, the Office of Audit, in Boston.



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Elimination of Waiting Period

Continued from page 1

legislation. The Congressman pointed out that several members of his staff had personal experiences with the waiting period and he and his staff firmly believed it should be abolished.

The time for eliminating the waiting period may be optimum. The Social Security Administration has introduced various new proposals in recent years, including the Quick Disability Determination (QDD) initiative and the Compassionate Allowance (CAL) initiative. The speed at which the DDSs are being asked to process these cases, and the success of the DDSs in not only meeting, but exceeding, the established goals for processing time on these cases, has been one of the rare success stories in the disability program. Yet, the fact remains that, while these cases are processed faster, the wait time to receive that first disability check has remained unchanged.

NADE begs to ask the obvious questions,

“What is the value in processing a case in 20 days if the claimant still has to wait five months for their first check?”

and,

“How compassionate is it to process a claim involving a catastrophic disabling condition if the claimant still must wait five months for that first disability check?”

These two initiatives have served to highlight the fallacy of the waiting period and the nightmarish impact it has for claimants.

Congressman McIntyre's legislation will be considered by Congress and NADE urges all of its members to contact their representatives in Congress and urge them to favor H.R. 33. NADE, as a professional association, will also continue to lobby Congress for passage of this legislation. The time has come.



Representatives from NCSSMA shared concerns and future hopes for the Social Security disability program with NADE leadership.

National Council of Social Security Managers Association Meets with NADE Board

by Melissa Phillips, MidAtlantic Regional Director

GREGG HEINEMANN, PRESIDENT of the National Council of Social Security Managers Association, (NCSSMA), NCSSMA Professional Lobbyist Rachel Emmons, and NCSSMA Vice President were invited to address NADE's Board of Directors at the recent MidYear Board meeting in Washington DC. Mr. Heinemann and Ms Emmons both noted the importance of their Association and NADE working together to address budget and workload concerns of the DDS.

As with many of the discussions during this board meeting, everyone was pleased with the budget that has been laid out for SSA, not only as part of the Stimulus Package but also the President's Budget, both of which showed an increase in funding from the previous year.

The field offices have reported record numbers of phone and walk in traffic. At the time of the meeting, it was reported that the DDSs' case load had increased 60,000 from the start of the fiscal year. Due to the increased number of claims that SSA is receiving, the field offices were being pushed to increase the number of electronic claims, both for retirement and disability claims. It was noted that the field offices continue to receive some paper filings that must be put into EDCS, and only the claims representatives have the authorization to perform this task. The field offices are reporting staff shortages, which has resulted in increased pressure on the workers. While the budget will allow for some increase in staffing, the learning curve for new hires won't immediately fix the production load. Since this push for electronic processing began, overall reviews of the process have been positive. The reviews have noted improved quality in the overall product. This is beneficial not only to the field offices but the DDSs and Hearings Officers as well.

Ms. Emmons reported the work of the advocacy group working with key members of the House and Senate to keep the needs of SSA at the forefront of discussions. They have met with

Continued on next page

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Members of the House Ways and Means Committee as well as Chairman of Finance and Budget Chair to insure that SSA continues to receive the needed funding to move forward.

Both groups acknowledged the hard work that lies ahead in meeting the needs of the public and agree that a strong relationship between the field offices and DDSs is crucial for the success of all involved.

IT Drives SSA on the Electronic Highway

by Mark Bernskoetter, Great Plains Regional Director

BILL GRAY, DEPUTY COMMISSIONER of Systems, shared the following information at the NADE mid-year board meeting. Information technology spending will be going into three primary components: infrastructure, eServices, and disability automation.

Infrastructure improvements in the way of a new data center are needed as SSA anticipates the need for four times the amount of data storage in the next five (5) years that it currently has. Vista will be piloted in June of this year and Microsoft Office will be released as well. Also, with the new data center, restoration of essential information in case of disaster could be done in 24 hours instead of in weeks.

eServices will focus on the retirement side of SSA's business. Currently, SSA has about 16,000 people each day filing for retirement and that number is expected to grow significantly over the next several years. Methods are in development to capture electronic applications for retirement, focused in part on capturing information that is already in the system for each account number instead of re-entering all information.

Disability automation includes eCAT (electronic case adjudication tool) which is being gradually rolled out. A new Disability Case Processing System (DCPS), featuring one computer system for all DDS and SSA FO offices to use, is being discussed. The plan is to begin a rollout in 2011, taking about two-to-three years for expansion nationwide. Hope is to convert each state system to DCPS completely with no need to maintain two systems. A new internet version of the 3368 is being developed to



Bill Gray discusses changes in the Systems section of SSA.

streamline the process of providing information and is planned to be released by December, 2009.

Office of Disability Adjudication and Review (ODAR) enhancements include sharing electronic files with attorney representatives over secure websites starting in October, 2009. ODAR may also have ePull which will scan and read dates in the medical evidence in order to chronologically sort and organize the medical in file (which is about 85% accurate to date). About 30% of ODAR notices are now being centrally printed and mailed. Videoconferencing for hearings is also being tested.

Additionally, Health Information Technology (HIT) employs business intelligence engines to read medical evidence of record (MER) that comes into the file and make suggestions to the examiner for possible next action on cases. From the time a case is sent to the DDS, the request and receipt of MER and the reading and formulation of recommendations takes about 42 seconds versus the average of 28 days to obtain MER at this time. Four more hospitals in Virginia will be coming on line with this process soon and Kaiser Permanente is discussing piloting in the fall, as well as some other facilities this year. SSA and Microsoft are working together to build and make accessible personal health records.

Just when you think systems advances have reached a climax, there is always more to accomplish and faster, greater advances to be made.

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NADE Leaders Visit Capitol Hill

by Jeff Price, Legislative Director

IN ADDITION TO their meetings with SSA Commissioner Michael Astrue, the Social Security Advisory Board, and others, NADE leaders (President Georgina Huskey, President-elect Susan Smith and Legislative Director and Past President Jeff Price) made NADE's presence known in our nation's capital earlier in the week of February 23, 2009 also made NADE's presence known on Capitol Hill later in that week. In meetings with the majority and minority staff from the Social Security Subcommittee and the Income Security & Family Support Subcommittee (subcommittees of the House Ways & Means Committee) and with the majority and minority staffs of the Senate Finance Committee, the NADE leaders carried forth the Association's message outlined in our Top Issues of 2009. The NADE leadership engaged in lengthy discussions regarding the future of the disability program and also accepted invitations to visit individually with more than 30 members of Congress and their staff. The NADE team focused attention on members who sit on the House Ways & Means and Appropriations Committees and the Senate Finance, Appropriations, and Health, Education, Labor and Pensions Committees.

The NADE leaders traversed the House and Senate Office Buildings urging Congress to appropriate sufficient funds for SSA's administrative budget and warned that the rising number of initial applications forecasted a trend that was likely to continue during this period of economic instability. Members of Congress and their staff expressed outrage that many States had already begun to furlough DDS personnel with other state employees or were considering such action. Congress agreed to initiate communication with individual state governors and with the National Governors Association, warning that Congress could consider it a misapplication of federal funds if federally funded state employees were furloughed with other state employees. NADE also has contacted the Government Accountability Office (GAO) to urge that audits be conducted to determine if those states furloughing DDS personnel were misapplying federal monies.

The NADE leadership found strong support in the Senate for our proposal to eliminate the necessity for use of the medical release form (SSA-827) in processing disability applications but the idea was greeted with somewhat muted enthusiasm in the House where the proposal has lacked sufficient votes for passage in the past. However, NADE made clear that the concept was one of expediency and noted that the elimination of the need for the medical release form was expected to produce savings in both processing time and administrative costs with little or no risk for the claimant. Claimant advocacy groups have opposed this proposal in the past and NADE has made a great effort to reach out to these groups to attempt to persuade them to support the proposal or, if not, if there could be room for compromise on this

issue. Many ideas were discussed and NADE now expects favorable action on this issue later in the year.

The NADE leadership team continued to canvass Congress for support for our proposal to eliminate the 5-month waiting period for Social Security disability benefits and the 24-month waiting period for Medicare eligibility. We did find support for these proposals and NADE will continue to urge Congress to eliminate these waiting periods.

The NADE leaders continued the Association's advocacy for a reduction in the 15 year vocationally relevant period to just five (5) years and we were greeted with wide enthusiasm for this proposal by the advocacy groups and by Congress. With SSA finally greeting the proposal with some enthusiasm, NADE is hopeful that positive action on this issue will be forthcoming in the very near future.

Is there a Future for Reconsideration?

An issue for which nearly everyone in Washington seemed to have an opinion was the future of the reconsideration appeal step. Although NADE is on record as supporting an enhanced reconsideration appeal step, a recent (2008) poll of our membership found varying support for different ideas regarding this appeal step. Based on the results of that poll and the feedback among other interested stakeholders, the NADE leaders signaled the Association would be open to further discussion on this issue and would not oppose that portion of legislation contained in H.R. 33 which calls for the elimination of reconsideration. Not surprisingly, NADE found, during its meetings in Washington, nearly universal support that reconsideration, as it currently exists, is a dinosaur that either needs to be brought into the 21st century or buried. NADE's position on the issue, while officially unchanged, will be that the effectiveness of, and the true value of, an intermediate appeal step should be subjected to serious study to determine if it is really necessary and, if so, how it can be made more efficient. Among the options for a new intermediate appeal step discussed with interested stakeholders were:

1. Allowing reconsideration to be an option for claimants - allowing claimants who are unlikely to be allowed by the DDS to "opt out" or reconsideration and appeal their initial denial decision directly to an Administrative Law judge (ALJ);
2. Allowing DDSs to re-examine claims pending at the ALJ level that were denied on the basis of duration and the 12 months has now surpassed, or if the claimant has aged into another vocational age category while the appeal has been pending;
3. Establishing a new definition of disability for older claimants who cannot return to past relevant work, i.e., eliminate consideration of Step 5 and allow the claim.

Continued on next page

4. Allow DDSs to refer some reconsideration claims to disability hearing officers, who are allowed greater discretion in the decision-making process than the typical disability examiner, to review the DDS case and render the appeal decision.

The days spent on Capitol Hill were very productive for NADE in regards to our ongoing advocacy for our Top Issues and our ability to add to the level of knowledge existing in Congress regarding the need for appropriate funding of SSA's administrative budget. We will continue our legislative efforts to ensure our proposals receive proper consideration. NADE members are strongly encouraged to review NADE's Top Issues for 2009 and to share these issues with their own representatives in Congress.



NADE's Top Issues for 2009

(This list does not reflect level of importance – all issues are equally important)

Continued support for appropriate level of funding for SSA and DDSs to insure that sufficient resources, including staffing levels and funds to purchase medical evidence of record (MER) and consultative examinations (CE's), are available to process the increasing workloads.

Continued support for the elimination of furloughs of state employees, including the federally funded DDS employees, by States seeking to use furloughs, or similar actions, to deal with their budget issues.

Continued support for improvements in customer service, including improvements in processing time, and significant reductions in pending backlogs at the initial, reconsideration and hearing level.

Continued support for the national roll-out of the Single Decision-Maker (SDM) model, coupled with the establishment of national standards for qualifications of Disability Examiners to become SDMs.

Continued support for efforts to develop a professional certification process for Disability Examiners, DDS Medical Consultants and DDS Support Staff personnel.

Continued support for legislation to eliminate the necessity for SSA and DDSs to use medical release forms (SSA-827) to acquire medical evidence of record.

Continued support for intermediate appeal step at the DDS, between the initial decision issued by the DDS and the ALJ hearing. NADE supports the expansion of the current reconsideration step to allow increased discretion by Disability Examiners making this appellate decision.

Continued support for improvements in salary and other compensation benefits for DDS staff to insure that the DDSs can compete in the hiring market for the best available personnel.

Continued support for the elimination of the 5-month waiting period for Title II claimants to receive cash benefits and for elimination of the 24-month waiting period for eligibility for Medicaid benefits.

Continued support for a reduction in the relevant vocational period from 15 years to 5 years and support for eliminating the need for disability decision makers to consider Step 4 in Sequential Evaluation when the claimant would still be a denial at Step 5.

Continued support for revisions in the Continuing Disability Review (CDR) process, including the medical improvement standard, and expansion of the Continuing Disability Investigation (CDI) units.

Continued support for timely revisions to the Listing of Impairments to reflect the continued improvements and technological advances being made in medicine.

Continued support for the enhancement of the role of the DDS Medical Consultant as a true consultant, especially on the more complicated disability cases, and for greater recognition of the DDS Medical Consultant as a Member of the DDS Adjudicative Team.

Continued support for ongoing enhancements in SSA/DDS computer systems to insure that the workloads can be effectively processed in a timely manner.

Deputy Commissioner Croft Comments on Quality Issues

by Donna Hilton, Publications Director

QUALITY IS A TIGHT rope balancing act - between making a timely decision and reaching the correct judgment based on the available evidence. On the SSA end of quality are the federal reviewers who are trying to balance tone and feedback to the DDSs. New changes have been implemented recently in the Office of Quality Performance (OQP). Kelly Croft, Deputy Commissioner, Quality Performance, described the changes as a “combo meal,” trying to do more in the review process.

Changes Implemented

1. The Office of Quality Performance has changed the pull for Pre-Effectuation Review (PER) cases to one that is more of an integrity review. They are looking at cases that would have more error and cost risk impact on the trust fund. Fifty percent of allowances reviewed are mandated. Cases with higher dollar risk to actuary will be a target of reviews.

2. 40,000 denials will be reviewed at random (with probably more reconsiderations being reviewed). Denial case accuracy runs 90-91 %. Allowance accuracy rates are 97-98%.

3. More positive feedback is being given now. Croft's reviewers looked over 200 cases in the last month. This new approach is designed to provide feedback to DDS on both allowances and denials. Croft hopes denial reviews will identify error causes to assist DDS. Denial reviews will not be counted as part of the mandated PER. OQP wants to give more detailed information back to help DDS with any problems or trends with denials. Some examples of problems being found were failure to address:

- Credibility of MER
- Credibility of MSS
- New allegations overlooked
- Mental cases in recon
- Body 1 errors

Reports of their findings will be published on the SSA Intranet.

ODAR is also feeding cases to OQM for review. Atlanta ODAR cases have been reduced from 800 days to 700 day by pulling cases that have a chance of being allowed. OQM staff must have senior attorney or a judge sign off on the change of decision to process an allowance.

Improving consistency

Request for Policy Clarification (RPC) has been a great aid and Croft favors eCAT. He stated that he is an advocate for a quicker roll out of eCAT. This tool has shown great promise as both a training and quality control tool. He indicated they are also making progress with moving from a regional to a national review process. OQM has long been aware of the inconsistencies be-



Kelly Croft updated the NADE Board on changes in quality reviews. He takes questions from NADE members Anne Graham (l) and Marty Blum (r)

tween regions and their hope is that a virtual review will help move toward a more uniform and national review process. Mr. Croft indicated they are nearly ready to move from a regional to a national review process, so any particular state DDS can have their cases reviewed in every regional office instead of just their “home” regional office.

Internal reviews have benefits for staffing but virtual/random reviews will provide consistency across the regions. Random reviews are done now on denials; next will be PER reviews, and lastly cases pulled for QA review.

CDR Quality Reviews

It takes administration money to save program money. When the program is funded to perform continuing case reviews, it enables SSA to save money by the ability to cease benefits to those who are no longer eligible to receive them. So far, it is looking favorable that they will be able to do more CDRs in 2009. Estimates indicate nearly 329,000 will be done. SSA is preparing mailers to send out to those beneficiaries who are diaried (called up) for review. It is also looking like SSA will be able to do more CDR reviews for 2010 also.

New tools from OQM – IDP, Disclosure Query and WHAT

An Occupational Information Development Advisory Panel is in place and conducting a study to change the time frame for past relevant work (PRW) from 15 years to 10 years. Regarding expansion of Single Decision Maker & Prototype process to all states, Deputy Commissioner Croft favors the return of the reconsideration step as part of the overall process. This will require more hiring at the DDS and FO in order to take more applications. This becomes a budget exercise. SSA will have to “buy” back SDM from a few states at a time. SDM predates the prototype and has 20 states involved in the process. The foremost issue is allowances and their impact to program costs by reintro-

Continued on next page

ducing the Reconsideration step. Ultimately, budget decisions play an important role in any changes the agency can afford to keep or drop. It is possible SSA will retain the SDM process for QDD (Quick Disability Decisions) and CAL (Compassionate Allowance) cases. Croft's guess is that if SDM rolled out to more states it is likely there would have to be parameters on experience for the examiners and the current process would be diluted in scope.

Tools are being developed to assist case development. A recent tool, the Disclosure Query, provides questions to help ensure authentication is obtained.

The Work History Assistance Tool (WHAT) can query SEQY information by year and indicates if work was SGA. Another option through an in house website is "My intranet/ PCom/Dibwiz," where a SEQY or DEQY can be obtained. Office of Quality Management (OQM) is open to ideas for building more tools to help examiners with case adjudication. Currently, there are ten examiners in the Chicago Regional Office who are working on fine tuning these newest tools for the operations' side.

As the SSA program moves to a web based format, we can expect to see more user friendly tools that will make case adjudication more consistent and streamlined.

NASI Reports On Improving Disability Services To Long Term Homeless

by Susan Smith, President-elect

NADE LEADERSHIP MET with staff from the National Academy of Social Insurance on Monday February 23rd, during which their report on SSA services for homeless was discussed at length. NASI helped to arrange a subsequent meeting between the NADE leadership and the authors of this report. On February 25th, NADE met with the authors of this report, Ms. Yvonne Perret and Ms. Deborah Dennis, as well as Ms. Virginia Reno, Vice President for Income Security Policy at NASI.

The authors gave NADE a detailed update on the project and reported that there were currently 34 states/DDSs participating and that the most recent data shows a 70% allowance rate for these claims and an average processing time of 93 days. Considering that anecdotal data have shown the majority of such claims are usually denied by the DDSs, secondary to insufficient evidence because of the failure to maintain contact with the homeless claimant, the allowance rate and processing time average were viewed by the NADE leadership as astounding. The NADE leadership expressed its support for continuation of this project and its expansion to all 50 states. The NADE leadership was also quick to express their gratitude to the report's authors and to NASI for their groundbreaking work in this arena. NADE and NASI agreed to work together toward the goal of increasing the assistance that is provided to homeless claimants who are seeking disability benefits so that these individuals can receive the benefits to which they are entitled.

(Their article can be found on page 24.)

NDPW Ideas *Continued from page 9*



Ideas for NDPW Categories for Chapter Nominations

1. Advertising for NDPW

DDS Agency

Off site (Press Releases, Internet, TV, Radio, Governor's Proclamation, etc.)

2. Recognition of Disability Professionals

Awards/Certification Ceremonies

Employee Appreciation Activities

3. Morale Building Events

Games, off site events, prizes, surprises, food, strengthening colleague rapport, stress reducing activities, etc.

4. Educational, Informational and Training Activities

NADE related

Medical, Vocational, SSA – related activities

5. Recruitment and Promotional Efforts for NADE

Recruitment Drives (% of membership increase)

New Members Events Recognitions

6. Planned Activity for Each Day

7. Community Outreach Activities

8. Charities

9. Incorporation of the Theme in the Weeks Events

10. Miscellaneous Category

Any other creative ideas your chapter uses to celebrate the week.

Committee Updates

2009 NADE Awards Criteria Announced!

by Leola Meyer, Awards Chair

IT'S THAT TIME AGAIN! Do you know someone who goes above and beyond for NADE, someone who deserves some recognition? Why not submit a nomination for a NADE national award? The nominating procedures and criteria for each award are listed below. Please take the time to nominate someone from your chapter for an award. The Awards committee looks forward to reading your nomination. The deadline to submit nominations is July 2, 2009. Nominations received after the deadline will not qualify for consideration.

NOMINATING PROCEDURES

- 1) Each chapter is responsible for selecting and nominating its own members on the approved forms (available through your chapter president).
- 2) Nominations must be submitted no later than July 2, 2009 to the National Awards Chair.
- 3) The nomination form should be typed and should explain in detail how the nominee exemplifies the specific criteria for each award.
- 4) A one page, typed attachment is permissible if needed.
- 5) Please do not refer to the member or chapter by name in the nomination. If an award contains this information, it will be disqualified.
- 6) Each chapter is limited to one nomination per award.

All nominations, as well as ballots, will be submitted to the Awards committee members (one from each region) by the Awards Chair. The results will be announced at the Awards Presentation at the 2009 NADE conference in Covington, Kentucky.

Nominations must be received by July 2, 2007.

Please email nominations to:

Leola.Meyer@ssa.gov

If you have any questions, you can contact Leola at (601) 853-5487 or at the above email address.

NADE AWARDS CRITERIA

The **PRESIDENT'S AWARD** is to be given annually and presented by the NADE President in recognition of an *outstanding Chapter*.

- (a) Any organized NADE Chapter which has demonstrated outstanding achievement by innovation of programs for improving medical and other professional community rela-

tionships, such activities as panel presentations, speeches, publication of bulletins, newsletters, circulars or other efforts to improve the quality of medical reporting or reporting of vocational assessments or the use of other professional information which can be utilized for the factual and effective documentation of disability determinations.

- (b) Any chapter activities which have enhanced working relationships among its professional communities.

The **CHARLES O. BLALOCK AWARD** is a service award to be presented annually and on a continuing basis in the name of the founder of NADE. It is made in recognition of an individual who has made extended efforts and major contributions toward the organizational advancement of NADE.

- (a) The recipient may be any professional member of the National Association of Disability Examiners who is employed either full or part-time.
- (b) The recipient shall have provided outstanding leadership in the development and substantial expansion of his/her State Chapter, Regional, and/or the National organization.
- (c) The recipient shall have shown consistent efforts over a period of at least three years toward the organizational advancement of NADE.
- (d) The recipient may be a Committee Chairperson, a National Board Member, a Chapter President or any Member who has promoted the advancement of NADE to an outstanding degree.

The **NADE AWARD** is to honor and recognize the disability professional of the year who has made outstanding contributions not only to the service of the claimant in accordance with his/her expertise but has contributed substantially of his/her time and talent to promote harmonious and more effective working relationships among his/her immediate professional community. The award shall be presented annually at the National Conference.

- (a) Anyone who is professionally identified as a disability professional, employed full or part-time.
- (b) Any NADE member engaged as a professional in any capacity, i.e., Medical Consultant, Adjudicator, Vocational Evaluation Consultant, Supervisor, etc.
- (c) Anyone who has consistently shown outstanding achievement by the use of initiative and humanitarian efforts and ability to effectively assist in the Social Security disability process.



Continued on next page

The **JOHN GORDON AWARD** is presented in the name of John R. Gordon to a supervisor in the disability program and is designed to honor and recognize superior performance in a supervisory capacity.

- (a) Any supervisor who is professionally identified as a NADE member.
- (b) Any supervisor who by his/her initiative and resourcefulness promotes cohesiveness in his/her work group.
- (c) Any supervisor who provides further incentive for personal growth and professionalism among the individuals he/she supervises.
- (d) Any supervisor who acts in his/her executive capacity in the promotion and maintenance of morale.
- (e) Any supervisor who exceeds the requirements of his/her role in facilitating the workloads of his/her Agency.

The **LEWIS BUCKINGHAM AWARD** is a professional award to honor and recognize a leader of the National Association of Disability Examiners at either the Regional or National level.

- (a) This person must consistently have shown outstanding achievement by the use of initiative and humanitarian efforts to further advance the professionalism and goals of the National Association of Disability Examiners.
- (b) The recipient must have contributed at least ten (10) years of continuous service to the organization.
- (c) The recipient should have served on the National Board of Directors.

The **DIRECTOR'S AWARD** is to honor and recognize an outstanding member of the support staff who demonstrates work performance efficiency and characteristics which contribute to the efficient operation of the unit and the morale of coworkers.

- (a) Any clerical or paraprofessional employee who is employed either full or part-time and is a member of NADE.
- (b) The recipient must have shown outstanding leadership and work performance among his/her peer group.

The **EARL B. THOMAS AWARD** is to be presented annually in the name of a charter member of NADE who was actively supportive of NADE as an association of disability professionals.

- (a) The recipient must be a member and active supporter of NADE.
- (b) The recipient must be the administrator of a State or Federal agency or be the top administrator of a Regional or Satellite DDS and have been so for three years.
- (c) The recipient must have contributed significantly to the program in ways consistent with the policies of NADE, beyond the normal administrative duties of his/her position.

The **FRANK BARCLAY AWARD** is presented annually in recognition of an individual who has demonstrated exceptional ability to motivate and challenge or to develop or promote programs which motivate and challenge personnel in a disability program and/or develop programs designed to motivate/challenge such personnel in personal and professional growth through human resource development.

- (a) The recipient must be a member of NADE.
- (b) The recipient must be assigned to job duties on a full or part-time basis. Examples of potential nominees include, but are not limited to, training officers, civil rights office employees, human resource management personnel, etc.
- (c) The recipient must have notable accomplishments in the area of human resource development, consistent with policies and objectives of our professional organization.

The **ROOKIE OF THE YEAR AWARD** is to be given annually to honor and recognize a disability professional who has made a significant contribution on a local, regional, and/or national level to the National Association of Disability Examiners.

- (a) The recipient must have been a member of NADE for less than two years, at the time of nomination (July 2), regardless of the number of years of service in a DDS.
- (b) The recipient must have made a significant contribution to their local, regional, and/or national level of NADE.

Remember the deadline is July 2, 2009!

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Calling For NADE Officer Nominations

by Vince Redlinger, Nominations Chair



THE NADE NATIONAL CONFERENCE is only a few short months away and it is time once again to give thought to running for a NADE national office. The call for nominations is now open for the positions of President-elect, Secretary, and Treasurer. The elections will take place during the General Membership Meeting at the 2009 National Training Conference to be held October 5-8, 2009 in Covington, Ky.

The qualifications necessary to become a candidate are: 1) a member in good standing; 2) a desire to promote the ongoing positive impact of NADE on Social Security Disability; 3) a willingness to commit your time, energy, and ideas to the advancement of the National Association of Disability Examiners.

Will you be that committed NADE member that has the desire and expertise to advance NADE through your ideas and efforts? If so, please express your interest by submitting a recent photograph with a brief resume announcing your candidacy to a Nominations Committee member no later than June 15th, 2009.

This will ensure that your candidacy nomination and photo will be announced in the summer edition of the NADE Advocate. While nominations will be accepted from the floor during the General Membership meeting at the National conference, the advantage of prior exposure in the Advocate goes to those who submit their nomination in advance!

Feel free to contact myself or any of the Nomination Committee members listed below.

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Candidate for Office

Trish Chaplin

Candidate for Chairperson for Council Presidents

I would like to take this opportunity announce my candidacy for re-election to Chairperson for Council of Chapter Presidents for 2009-2010. I am very involved on the local and state levels as I am currently the Missouri Chapter President and have served 2 terms in this capacity. I believe in the work that we do as disability professionals with our customers and in NADE.

During this past year, I have found that the Chairperson for CCP is a very vital part of the NADE family as I have continued communication with the Board and chapter presidents. I have taken my responsibilities very seriously and strived to meet the charges as the CCP Chairperson. Communication between the board and the chapter presidents is central to NADE's growth. This year as CCP Chair, I have been involved in numerous projects, including the NADE Mentoring Program, promoting Recruitment and Retention, informing chapters about membership and publication grants I have thoroughly enjoyed serving in this position and would love to have the opportunity to serve NADE chapters again. I would greatly appreciate your vote for CCP chairperson. Thanks you for your consideration and see you around NADE.



Trish Chaplin

Candidate for Office

Tonya M Scott **Candidate for Secretary 2009-2010**

I would like to take the opportunity to announce my candidacy for the office of NADE Secretary for 2009-2010.

When I solicited your vote for the office of NADE Secretary in 2008, I was a neophyte to NADE Board. Since joining the NADE Board in September, 2008, I have grown in wisdom and knowledge. I have successfully fulfilled the duties in which I was charged. I have truly enjoyed the time that I have served and ask for your support and vote that I may continue to serve you.



Tonya Scott

I started working for the Georgia DDS October, 2000. I joined NADE in April, 2001.

I have always strived to be an active, productive member in my local chapter. I have served on various committees on the local level (Community Services, Program/Social, Ways and Means, and Membership), as well as on the Regional level. I served as the Secretary/Treasurer of the Southeast region for the 2006-2007 year. I served as the treasurer for our local chapter for two years, 2006-2008. I am currently the Membership Chairperson of my local chapter and we have had a 10%+ increase in membership. I was awarded the E B Agnor Award for Adjudicator of the Year in 2006.

I have attended National Conferences in Boise, San Diego, and Nashville, as well as numerous regional conferences. I was actively involved in the Southeast/Great Lakes Bi-Regional Training Conference in Atlanta in May, 2007.

I have benefited greatly from the NADE training opportunities. I have enjoyed attending and meeting other members. My involvement with the local chapter of GADE and with NADE activities/training has greatly benefited me in my ability to serve the claimants more effectively. I look forward to the opportunity to continue serve NADE and will dedicate the time required to perform the duties of secretary.

I respectfully request your support again.

Thank you,

Tonya M Scott



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Join the Crowd – Get Certified!!

by Ellen Cook, Professional Development Chair



THE APPLICATIONS FOR NADE Certification of Disability Professionals are pouring in. You need to get in line right now before the crowd gets away from you and leaves you behind!!

NADE offers Professional Certification to Examiners, Support, and Medical members. But the only way to obtain this Certification is to apply for it. Your attainment of Certified Disability Examiner status places you in a unique position as a highly qualified expert in the profession of disability adjudication. Advanced training and service will enable you to bring a higher level of expertise to the field of disability adjudication and provide more effective and efficient service to the population we serve.

All NADE members, whether you are a support professional, medical professional or disability professional, can be certified. All the information you need to apply is on our website at www.NADE.org. Choose Certifications under the CAREERS heading on the far right of the home page. Even the forms that you need to complete are there, whether it's for certification or recertification.

If you have never been certified as a NADE professional, it's time to see if you qualify. If you have been a NADE member at least one year, and have held a position with your DDS for at least 3 years, you qualify. Just complete your certification form, including listing all your training hours, and have it signed by your Agency Director, your Regional President, or your local Chapter President. (You may be surprised to see how much training you have had.) Send it in, and your certificate will be on its way back to you soon.

If you have been previously certified (anytime before 2006) it is time to be re-certified. To maintain your certification you need to have had 15-25 additional hours of training every three years, depending on your member classification. In this way NADE Certification remains current at all times. No resting on our laurels in this program! We keep learning and growing and we should be recognized for that.

Chapter Presidents: have you appointed a certification chair? This position can perform a real service for your chapter by checking the certification status of your members against the master membership list sent each month. That way, any errors or oversights can be corrected, and you will have an updated record of the certification status of all of your members. This chair can also make sure everyone keeps records of their continuing education credits.

I encourage each member to solidify his/her dedication to this profession and apply to be certified today. Then display the certificate proudly as a testament to your achievement.

I look forward to hearing from all our members this year.

Please contact me at ellen.cook@ssa.gov , 217-741-8151,
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Spotlight on Corporate Members

Med Plus - Family Owned Company Provides Quality Evaluations

by Maya Delion, SE Publications Representative

MED PLUS DISABILITY EVALUATIONS, founded by Dr. Claude Earl Fox, is a physician owned, family operated company that has been in business for 14 years. Dr. Fox is a professor at the University of Miami School of Medicine and founder of the Johns Hopkins Urban Health Institute and the Florida Public Health Institute. He began doing consultative exams himself 28 years ago for Mississippi DDS. In 1993, Dr. Fox accepted a position in the federal service with the Department of Health and Human Services and first started operating as Med Plus.

His company began with only one physician and one site and now works with over 100 physicians in 10 states and over 70 sites providing services to DDS offices. The company has full time offices in Tennessee, Alabama, Mississippi, and Florida. The main Med Plus office is located in Fort Lauderdale, Florida. Dr. Fox's experience as a state employee (Alabama State Health Commissioner) for 22 years and a federal civil servant (Deputy Assistant Secretary for Health as well as other positions) for 7 years helps him understand the pressures and resource limitations that DDS offices are often required to deal with in doing their work.

A unique aspect of Med Plus is that Dr. Fox continues to personally recruit and train all of the physicians the company employs, just as he did from the start. "It gives me a way to staying connected to what we are doing and an opportunity to personally know and feel comfortable with our medical staff and their capabilities." In addition to training new physicians, Dr. Fox also continues to provide quality assurance and frequently assists DDS offices in obtaining needed clarification from Med Plus physicians for follow up questions. In accordance with our new digital era, Dr. Fox states that Med Plus is transitioning to a completely paperless work environment both administratively and for providing consultative exams through the ERE website. Med Plus is already in several locations able to download CE information and then load back up consultative reports through the ERE site. Dr. Fox plans for Med Plus to be totally paperless within the next 18 months.

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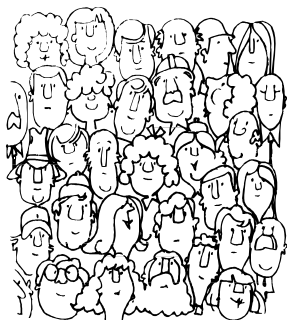
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Contact the NADE Publications Director Donna Hilton to change your paper copy into a color electronic copy! To view the *Advocate* electronically, go to www.nade.org and click on Publications.



Improving Social Security Disability Programs for Adults Experiencing Long-Term Homelessness

Yvonne M. Perret

*Executive Director, Advocacy and Training Center
Cumberland, MD
and*

Deborah Dennis

*Vice President, Policy Research Associates, Inc.
Delmar, NY*

SINCE THE EARLY 1980s, homelessness has become an increasingly significant social problem demanding local, state, and federal attention and resources.¹ The major cause of homelessness is the lack of affordable housing, but the situation for many people is more complex (National Alliance to End Homelessness 2007). Federal funding for public and low-income housing was cut significantly during the Reagan years, and state psychiatric hospitals closed or reduced their censuses at greater rates. Funds for community-based treatment and housing for people leaving these facilities were not forthcoming, and many persons with serious mental illnesses became homeless as a result.

Lacking income and health insurance, many homeless persons with mental illnesses and/or co-occurring substance use disorders are unable to exit homelessness on their own. About 25 percent of people who are homeless have serious mental illnesses, including diagnoses of chronic depression, bipolar disorder, schizophrenia, schizoaffective disorders, and severe personality disorders (National Alliance to End Homelessness 2008). It is difficult to determine the proportion of people in specific diagnostic categories because people who are homeless often receive treatment only in acute or emergency situations, making accurate and consistent diagnoses a challenge. People with mental illness are estimated to comprise 10 percent of the population that has been homeless a year or longer and consume approximately 50 percent of all homeless emergency services (Culhane et al. 2007; McNiel and Binder 2005; Burt et al. 2001; Metraux et al. 2001).

Income is essential to gain housing. For people who are disabled due to a serious mental illness, Social Security disability benefits (SSDI) and Supplemental Security Income (SSI) are the primary sources of stable income (Schoeni and Koegel 1998).^{2,3} People recovering from long-term homelessness also typically need supportive services and physical and behavioral health care. SSDI, which provides Medicare after a two-year wait, and SSI, which makes Medicaid available to recipients in most states, provide the health insurance needed to pay for treatment and other supports (Burt and Sharkey 2002; Fawcett 2002; Rosenheck et al. 2000).

Access to these benefits for people who are homeless is fraught with such difficulty that many eligible people do not apply, are denied benefits for technical reasons, or wait years for resolution of their cases. The difficulties inherent in navigating the SSDI/SSI application process are both individual and sys-

temic. Individual challenges arise from the nature of homelessness itself, with its impact on keeping appointments, having transportation, and being able to meet other basic needs. The inability to meet these needs makes it more difficult for these individuals to get to Social Security Administration (SSA) offices and/or to obtain required documentation. Systemic obstacles include not being able to access needed medical care or the documentation required for the disability review in the application process; the fact that SSA communicates by mail; the need for a lengthy appeals process before being approved; and a lack of information about how to address this process among community providers who assist persons who are homeless.

In response to these individual and system-level challenges, the authors propose three strategies that would improve the processing of applications and potentially avoid the need for lengthy appeals. These include: (1) expanding the list of acceptable medical sources; (2) adding a presumptive disability category for SSI for people with schizophrenia who are homeless for at least 6 months, and (3) refining or modifying processes to more effectively address the unique needs of adults who are homeless.

For purposes of disability determination, the Code of Federal Regulations that mandates SSA policy requires that evidence of one's impairment must come from an "acceptable medical source." SSA regulations state: "Acceptable medical sources are (1) licensed physicians; (2) licensed or certified psychologists; (3) licensed optometrists; (4) licensed podiatrists; and (5) qualified speech-language pathologists (Code of Federal Regulations 2007). For SSA to add a profession to the list of acceptable medical sources, that profession must show that it "adhere[s] to consistent educational training requirements; [has] national standardization of licensing or certification requirements in these jurisdictions; and show[s] consistency in the scope of practice and degree of supervision required" in all 50 states, the District of Columbia, and the U.S. Territories (Karman 2008).

Expanding the list of acceptable medical sources to include certified nurse practitioners, certified physician assistants, and licensed clinical social workers would enhance homeless individuals' ability to obtain the diagnostic information required for applications. These practitioners are generally more readily accessible in the publicly funded health and mental health care systems. Each of these professions has requirements comparable to SSA's currently acceptable medical sources, and this change

Continued on next page

would more accurately reflect the reality of who is providing most of the primary and behavioral health care in the United States, particularly in the publicly funded health and behavioral health systems. Presumptive disability (PD) is possible under the SSI, but not the SSDI, program. It can be authorized at the local SSA office for a limited list of disabilities.⁴

Presumptive disability provides six months of SSI payments, virtually immediately after application, while the application is processed through usual channels. Currently, the SSA offices cannot approve presumptive disability for people who have schizophrenia and who have been homeless for at least six months. These individuals can be granted benefits through normal channels, but they rarely have the extensive medical documentation needed for approval. Unlike other psychiatric diagnoses, making a diagnosis of schizophrenia includes a specific durational component. Long term homelessness, in and of itself, is indicative of functional impairment. Together, a diagnosis of schizophrenia and long-term homelessness meet the disability criteria of a diagnosed impairment that has lasted at least 12 months along with functional limitations on the ability to perform substantial gainful activity.

Lastly, process strategies such as tracking residential status of SSI/SSDI applicants, flagging applications from applicants who are homeless, assigning these applicants to SSA staff who specialize in homelessness, and training SSA staff on the impact of homelessness and mental illness would enhance the service SSA provides to this vulnerable population. These recommenda-

tions are also consistent with the SSA Homeless Plan developed in 2002, which recognizes that this is a unique population that deserves special consideration and assistance.

In summary, these policy changes would make it possible for applicants who are homeless to access benefits more quickly and to begin their recovery from homelessness and illness. Long-term homelessness is debilitating, traumatic, and all consuming. Without intervention, it leads to hopelessness, poor health, and death. Implementing strategies to address these impacts are essential to save lives and reduce unnecessary suffering.

1 Estimating the number of people who are homeless is difficult as definitions of homelessness across federal agencies are inconsistent, and finding everyone who is homeless for an accurate count is challenging. According to the Third Annual Homelessness Assessment Report to Congress, an estimated 2.5 to 3.5 million people were homeless in 2007. Two-thirds of those interviewed for the report said that the reason they were homeless was related to a mental illness and/or a substance use problem (US Department of Housing and Urban Development 2008).

2 Supplemental Security Income is not a Social Security benefit, but the Social Security Administration administers the program.

3 To obtain Social Security disability insurance benefits, an individual must be unable to engage in any substantial gainful activity for reasons of physical or mental impairment that can be expected to result in death or to last for at least 12 months.

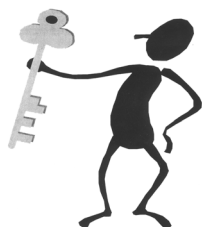
4 Medical conditions that qualify for an award of PD include amputation of a leg at the hip, total deafness or blindness, Amyotrophic Lateral Sclerosis (Lou Gehrig's disease), and Down Syndrome, among others.

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Professional Relations Officers Attend National Conference in Miami

by Diane Hare, South Carolina DDS



PROFESSIONAL RELATIONS OFFICERS (PROs) from around the country attended a national PRO conference December 15 – December 19 in Miami, Florida. The conference was coordinated by the Medical/Professional Relations Operations Team (M/PRO) which consists of Liz Peightal-Farrell, Katrice Kendal and Ruthie Trent – with help from others as well. It provided additional Electronic Records Express (ERE) training and opportunities for sharing information and best practices.

Some may wonder why PROs would need additional ERE training. The short answer is because PROs have been charged with marketing ERE, training providers to use ERE and to help trouble shoot ERE when problems arise. Also, some PROs are fortunate enough to have technical support; while others are not. The information presented allows us to stay current with ERE changes and to increase our knowledge base. This enables us to better serve the Social Security Administration, the Disability Determination Services and ultimately, the disability claimant.

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We were pleased to have Ruby Burrell address the conference and provide updates on the various work groups and ERE progress. Health Information Technology (HIT) is the wave of the future and SSA is the only government agency so far to participate in it. Since HIT allows for transfer of data from computer to computer via specific codes, it will allow for very quick decisions.

With the advent of the Quick Disability Determination (QDD) and Compassionate Allowances, an ongoing issue for NADE and others is the 5-month waiting period. PROs questioned the benefit of an instant decision when there is still a 5-month waiting period. Ms Burrell agreed and said that SSA was working on a revision.

Eliminating the SSA-827 was also discussed. This continues to be a priority at the national level. Highlights of the legislation state that the MER provider “shall” provide records to SSA if their patient applies for disability benefits, which will be considered an agreement between the claimant and SSA. This agreement will override state laws concerning release of information.

The presentation on Disability Case Processing System (DCPS) was also very informative, stressing the need for a single case processing system. A single case processing system used nation wide fits well with the HIT goals and will also be useful for other business applications. NADE supports this and all are encouraged to submit their ideas to the DCPS web site.

The M/PRO team did a fantastic job coordinating the conference. It was really great to see fellow PROs and NADE members from around the country. Although the conference was hard work in Miami, there was time for sight seeing and dining after the meetings. There are a lot of great NADE conferences coming up – maybe we’ll see you there!

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